

EXECUTIVE SUMMARY

Logan Storage Sites, commonly known as Bob Logan Tractor Company, L10302501, ILD025475914, located one block north of State Street and Middle Street, Franklin Grove, Illinois and Lee County.

On or before 1976, Bob Logan Tractor Company has stored ignitable wastes which have been identified or listed as hazardous wastes under Section 3001 of the Act, 40 CFR Part 261, without a permit and without having achieved interim status.

There were roughly 1400 drums of paint waste solvents and sludge received from Valspar Corporation, Rockford in 1976. EPA hazardous waste numbers for the waste in the above drums are: D001, D002, K054, K078, K079, the latter three are delisted.

By December 11, 1981, all RCRA hazardous wastes had been removed from the site. The disposition of these wastes are as follows:

<u>Year</u>	<u>RCRA Regulatory Status</u>	<u>No. of Barrels</u>	<u>Destination</u>	<u>IEPA Supp. Permit No.</u>	<u>Technology</u>
1981	hazardous	521	BFI/Davis Jct.	810879	Secure Landfill
1981	exempt	130	Huckill Chem.	994602	Recovery (Fuel)
1981	exempt	420	Solvent Recovery Corporation	994603	Recovery (Distillation)
1982	non-hazardous	196	Dakota Landfill	N/A	Landfill

All spilled materials and contaminated soils were placed in 55 gallon drums and disposed of as part of the above wastes. The remaining non-hazardous wastes were disposed of by October 30, 1982.

~~Certification that the site has been closed in accordance with the approved closure plan by the owner/operator, Bob Logan, and an independent registered professional engineer of Illinois, Gary L. Ebersole, was received at this Agency (IEPA) March 16, 1983.~~

~~The Agency concurred that the hazardous waste storage site was closed in accordance with the referenced closure plans and in accordance with the Interim Status Standards, Ill. Adm. Code, Part 725 (40 CFR, Part 265).~~

The author concludes that no further actions or investigations are needed at this site.

KP:tk:S/29

EPA Region 5 Records Ctr.




358592

SD 76/06

NOT RCB

7/16/85

 L10302501		POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT PART 1 - SITE INFORMATION AND ASSESSMENT		I. IDENTIFICATION 01 STATE IL 02 SITE NUMBER 025475914	
II. SITE NAME AND LOCATION					
01 SITE NAME (Legal, common, or descriptive name of site) LOGAN STORAGE SITES			02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER Box 216 STATE STREET		
03 CITY FRANKLIN GROVE			04 STATE IL	05 ZIP CODE 61031	06 COUNTY LEE
09 COORDINATES LATITUDE 41.5035.0			LONGITUDE 089.1808.0		
07 COUNTY CODE 103			08 CONG DIST 16		
10 DIRECTIONS TO SITE (Starting from nearest public road) SEE ATTACHED MAP					
III. RESPONSIBLE PARTIES					
01 OWNER (If known) ROBERT LOGAN			02 STREET (Business, mailing, residential) Box 216 STATE STREET		
03 CITY FRANKLIN GROVE			04 STATE IL	05 ZIP CODE 61031	06 TELEPHONE NUMBER Non-Responsive
07 OPERATOR (If known and different from owner) SAME			08 STREET (Business, mailing, residential)		
09 CITY			10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ()
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input type="checkbox"/> A. RCRA 3001 DATE RECEIVED: ____/____/____ MONTH DAY YEAR <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ____/____/____ MONTH DAY YEAR <input checked="" type="checkbox"/> C. NONE					
IV. CHARACTERIZATION OF POTENTIAL HAZARD					
01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 05/29/80 MONTH DAY YEAR <input type="checkbox"/> NO 12/06/82 MONTH DAY YEAR			BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify)		
02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN			03 YEARS OF OPERATION Prior to 1976 BEGINNING YEAR _____ ENDING YEAR <input type="checkbox"/> UNKNOWN		
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED SLUDGES, SOLVENTS / CORROSIVE, flammable, ignitable					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION GROUND WATER (population/environment)					
V. PRIORITY ASSESSMENT					
01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents) <input type="checkbox"/> A. HIGH (Inspection required promptly) <input type="checkbox"/> B. MEDIUM (Inspection required) <input type="checkbox"/> C. LOW (Inspect on time available basis) <input checked="" type="checkbox"/> D. NONE (No further action needed, complete current disposition form)					
VI. INFORMATION AVAILABLE FROM					
01 CONTACT		02 OF (Agency/Organization)		03 TELEPHONE NUMBER ()	
04 PERSON RESPONSIBLE FOR ASSESSMENT Kenneth Page		05 AGENCY IEPA	06 ORGANIZATION HSCS	07 TELEPHONE NUMBER 217 7826760	08 DATE 05 22 85 MONTH DAY YEAR



EPA FORM 2070-12 (7-81)



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

ILD 025475914

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ B. SURFACE WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ C. CONTAMINATION OF AIR

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☒ POTENTIAL

☐ ALLEGED

Some of the paint wastes were tested and found to be ignitable.

01 ☐ E. DIRECT CONTACT

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ F. CONTAMINATION OF SOIL

03 AREA POTENTIALLY AFFECTED: _____
(Acres)

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☒ POTENTIAL

☐ ALLEGED

ON-SITE CONTAMINATION COULD OCCUR FROM LEAKING DRUMS.

01 ☐ G. DRINKING WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

There are no drinking water wells within 1/4 mile of the site.

01 ☐ H. WORKER EXPOSURE/INJURY

03 WORKERS POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ I. POPULATION EXPOSURE/INJURY

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

N/A



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
ILD 025475914

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (Include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills, runoff, standing liquids, leaking drums)

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

N/A

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis, reports)

IEPA Division FILE — LAND